philanthropic institutions/organizations. Despite this, the private sector plays an important role in providing basic health care services in the country.

Notwithstanding the above, the Government is committed to increasing expenditure in health sector from current level of 0.9% of GDP to 2-3% of GDP over the next five years through the National Rural Health Mission to improve basic health care services for the common man.

Committee on AIIMS

*266. SHRI VIJAY J.DARDA:
SHRIMATI SHOBHANA BHARTIA:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether four-member committee constituted by the Centre to study the functioning of the AIIMS has submitted its report to Government;

(b) if so, what are the main recommendations made by the Committee;

(c) whether with an aim of reducing patient load in its main hospital AIIMS, Government are considering setting up of ten new super-specialities, self-sufficient centres like AIIMS in the country;

(d) what are the places where these centres are likely to be set up; and

(e) by when these centres would start functioning?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMDOSS): (a) to (e) A Committee under the chairmanship of Dr. M.S. Valiathan, consisting of Shri P.K. Hta, the then Secretary (H&FW) Dr. M.K. Bhan, Secretary, Department of Biotechnology and Dr. R.K. Srivastava, Director General of Health Services as Members was constituted to study the functioning of AIIMS and to make recommendations for further development of the institute. The Committee has submitted its report, which is under consideration of the Government.

The committee has, *inter alia,* made the following recommendations:

(1) AIIMS should develop a mission statement reflecting priorities which should be education, research and services like great medical universities so that pressure for expansion of hospital services do

not lead to gradual marginalization of education in research. The statement of goals and programmes should identify its role in human resource development that will enhance the nation's strength to fight disease, promoting scientific discoveries and innovation of their application to improve public health.

(2) AIIMS should develop new modals of UG/PG medical education relating to public health of the country and recent technologies. The K.L. Vig Centre to be reactivated as a vibrant unit of innovation and advancement in medical education.

(3) Undergraduate training provided by AIIMS need to be reoriented to meet socio-cultural needs of the people of the nation.

(4) AIIMS should be a key partner in emerging national programmes. Accordingly, it should be its endevour to join other reputed institutes to develop tools sought by public health organizations, such as instruments disposable devices, diagnostic kits, vaccine etc. and transfer the technology for application.

(5) To set up affiliate self-financing, non-profit body, viz. 'AIIMS INTERNATIONAL' which would draw upon intellectual and professional strengths of AIIMS for in Global Mission.

(6) To set up a new personnel department to monitor the loss/impending loss of faculty/skilled manpower.

(7) To develop a new personnel policy which should also cover the acceptable ratio to faculty to non-teaching staff and Group 'A' to other support staff.

(8) To streamline the recruitment process with a view to eliminating inbreeding in selection/promotion of faculty and other staff; also to entrust the recruitment to various recruiting organizations like UPSC, SSC etc.

(9) To set up Project Planning & Monitoring Committee to avoid time overrun and high cost overrun of major projects, in the context of undue delay in completion of major projects and to ensure timely completion it has been recommended no projects should be launched without the DPR duly approved by GB/Central Government.

(10) Expansion plans of AIIMS should be evaluated in the light of AIIMS's aims and objectives and not merely in terms of engineering feasibility; expansion in OPD should be coupled with introduction of MD course in family medicine.

(11) Establishment of two Research Councils to review and monitor ongoing progress of research, quality of publications, generation of external grants, plans for starting or expanding research facilities and to make recommendations to GB every year; the Research Council should also play role in advancing the industrial linkage in R&D Projects.

(12) Made specific recommendations on the governance structure of AIIMS and consequential Amendments to Act, Rules/Regulations.

In order to reduce the patient load in AIIMS, under Pradhan Mantri Swastha Suraksha Yojana (PMSSY), it is proposed to set up one AIIMS like institution each in the State of Bihar (Patna), Chhattisgarh (Raipur), Madhya Pradesh (Bhopal), Orissa (Bhubaneswar), Rajasthan (Jodhpur) and Uttaranchal (Rishikesh). The objective of the Scheme is to correct the regional imbalance in the availability fo affordable/reliable tertiary Health care services and also to augment facilities for quality medical education in the country. Under the Scheme, 13 existing Medical institutions have also been identified for upgradation to the level of AIIMS. AIIMS like institutions are likely to be established within a period of three to four years. The Scheme would greatly reduce the influx of patients coming from States outside Delhi to AIIMS for tertiary healthcare.

Petroleum, chemicals and petrochemicals investment regions

*267. SHRIMATI S.G. INDIRA:
SHRIMATI N.P. DURGA:

Will the Minister of CHEMICALS AND FERTILIZERS be pleased to state:

(a) whether it is a fact that Government had decided to set up massive petroleum, chemical and petrochemical investment regions across the country;